

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George S. Workinger
1170 Valley Green Rd.
Etters, PA 17319

2. Article Number (Copy from service label)

1000 0620 0023 0166 3333
PS Form 3811, July 1999

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

C. Signature

D. Is delivery address different from item 1?
If YES, enter delivery address below:

B. Date of Delivery

☐ Agent☐ Addressee☐ Yes☐ No

3. Service Type

☒ Certified Mail☐ Registered☐ Insured Mail☐ Express Mail☐ Return Receipt for Merchandise☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

FILED
HARRISBURG PA

JUN 07 2001

RYE E. D'ANDREA
Deputy

-CV-01-130

order

6-4-01